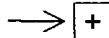


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PTO/SB/01 (10-00)

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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☒ Declaration  
Submitted  
With Initial  
Filing  
**OR**  
☐ Declaration  
Submitted after Initial  
Filing (surcharge  
(37 CFR 1.16 (e))  
required)

Attorney Docket Number 6033-019

First Named Inventor Sze Tan

**COMPLETE IF KNOWN**

Application Number New Application

Filing Date Herewith

Group Art Unit

Examiner Name

**As a below named inventor, I hereby declare that:**

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**"METHOD AND APPARATUS FOR RAPIDLY AND ACCURATELY DETERMINING  
A TIME CONSTANT FROM CAVITY RING-DOWN DATA"**

the specification of which (Title of the Invention)

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 3]

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## DECLARATION — Utility or Design Patent Application

Direct all correspondence to:		<input type="checkbox"/> Customer Number or Bar Code Label		<input type="checkbox"/> Correspondence address below	
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Address		Suite 808			
City		State		ZIP	
San Jose		California		95113	
Country		Telephone		Fax	
U.S.		(408) 293-9934		(408) 293-2183	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name		Surname		Family Name TAN or Surname	
Inventor's Signature		Date			
Sunnyvale		CA		USA	
Residence: City		State		Citizenship	
Sunnyvale		CA		New Zealand	
Mailing Address 160 Locksunart Way, Apt. 20					
Mailing Address					
City		State		Country	
Sunnyvale		CA		USA	
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name		Surname		Family Name FIDRIC or Surname	
Inventor's Signature		Date			
Cupertino		CA		USA	
Residence: City		State		Citizenship	
Cupertino		CA		USA	
Mailing Address 11713 Westshore Court					
Mailing Address					
City		State		Country	
Cupertino		CA		USA	
<input checked="" type="checkbox"/> Additional inventors are being named on the one supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					

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<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S)</b> <b>Supplemental Sheet</b> Page <u>1</u> of <u>1</u>
--------------------	---

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Robert		LODENKAMPER	
Inventor's Signature		Date <u>7/2/03</u>	
Residence: City	Sunnyvale	State	CA
		Country	USA
Mailing Address			
1614 Albatross Drive			
Mailing Address			
City	Sunnyvale	State	CA
		ZIP	94087
		Country	USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
		Country	
Mailing Address			
Mailing Address			
City		State	
		ZIP	
		Country	
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
		Country	
Mailing Address			
Mailing Address			
City		State	
		ZIP	
		Country	

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PTO/SB/81 (10-00)

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<b>SIZE TAN, ET AL.</b>	<b>Application Number</b>	<b>New Application</b>
	<b>Filing Date</b>	Herewith
	<b>First Named Inventor</b>	Size TAN
	<b>Group Art Unit</b>	N/A
	<b>Examiner Name</b>	N/A
	<b>Attorney Docket Number</b>	6033-019

I hereby appoint:

☐ Practitioners at Customer Number

OR

☒ Practitioner(s) named below:

Place Customer  
Number Bar Code  
Label here

Name	Registration Number
Herbert Burkard	24,500
John Schipper	26,994

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☐ The above-mentioned Customer Number.

OR

<input checked="" type="checkbox"/> Firm or Individual Name	LAW OFFICE OF JOHN SCHIPPER				
Address	111 N. Market Street				
Address	Suite 808				
City	San Jose	State	California	ZIP	95113
Country	U.S.A.				
Telephone	(408) 293-9934	Fax	(408) 293-2183		

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.

*Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).*

**SIGNATURE of Applicant or Assignee of Record**

<b>Name</b>	Size TAN
<b>Signature</b>	<i>Tan Sze Meng</i>
<b>Date</b>	7/02/2003

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☒ \*Total of 3 forms are submitted.

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